## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

18078829

| 2.100.110 0 0.000 1, 2000   |  |   |              |                                   |                     |                  |                | 1                 |                        |         |                            |                        |
|---|--|---|--------------|-----------------------------------|---------------------|------------------|----------------|-------------------|------------------------|---------|----------------------------|------------------------|
| CLAIMS AS FILED - PA<br>(Column 1)  |  |   |              |                                   | ART I<br>(Column 2) |                  |                | SMALL ENTITY TYPE |                        | OR      | OTHER THAN OR SMALL ENTITY |                        |
| TOTAL CLAIMS  |  |   |              |                                   | -                   |                  | RA             | ΓE                | FEE                    | 7       | RATE                       | FEE                    |
| FOR   |  |   | NUMBER FILED |                                   | NUMBER EXTRA        |                  | BASIC          | FEE               | 385.00                 | OR      | BASIC FEE                  | 770.00                 |
| TOTAL CHARGEABLE CLAIMS   |  |   | minus 20=    |                                   | *                   |                  | X\$            | 9=                |                        | OR      | X\$18=                     |                        |
| INDEPENDENT CLAIMS  |  |   | minus 3 =    |                                   | *                   |                  | X4:            | 3=                |                        | OR      | X86=                       |                        |
| ΜL  | ILTIPLE DEPE                                   | NDENT CLAIM P   | RESENT       |                                   |                     |                  | +14            | <br>5=            |                        | OR      | +290=                      |                        |
| * If the difference in column 1 is less th  |  |   |              | an zero, enter "0" in column 2    |                     |                  | TOT            | AL                |                        | OR      | TOTAL                      |                        |
| CLAIMS AS AMENDED - PART II   |  |   |              |                                   |                     |                  | OTHER THAN     |                   |                        |         |                            |                        |
|   |  | (Column 1)  | (Colum       |                                   |                     | (Column 3)       | SMA            | SMALL ENTITY      |                        | OR      | SMALL                      | ENTITY                 |
| AMENDMENT A   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT                     |              | HIGH<br>NUME<br>PREVIC<br>PAID I  | BER<br>OUSLY        | PRESENT<br>EXTRA | RAT            | E                 | ADDI-<br>TIONAL<br>FEE |         | RATE                       | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *   | Minus        | **                                |                     | =                | X\$ 9          | 9=                |                        | OR      | X\$18=                     |                        |
|   | Independent                                    | *   | Minus        | ***                               | OL 4114             | =                | X43            | =                 |                        | OR      | X86=                       |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |              |                                   |                     |                  |                | 5=                |                        | OR      | +290=                      |                        |
| TOTAL   |  |   |              |                                   |                     |                  |                |                   |                        |         | TOTAL                      |                        |
| ADDIT. FEE  |  |   |              |                                   |                     |                  |                |                   |                        |         |                            |                        |
| <b></b>   | CLAIMS HIGHE                                   |   |              |                                   | (Column 3)          |                  |                | ADDI-             |                        |         | ADDI-                      |                        |
| AMENDMENT B   |  | REMAINING<br>AFTER<br>AMENDMENT                               |              | NUME<br>PREVIO<br>PAID F          | USLY                | PRESENT<br>EXTRA | RAT            | E                 | TIONAL<br>FEE          |         | RATE                       | TIONAL<br>FEE          |
|   | Total  | *   | Minus        | **                                | ** **.              | =                | X\$ 9          | =                 |                        | OR      | X\$18=                     |                        |
|   | Ind pendent                                    | d pendent * Minus ***  RST PRESENTATION OF MULTIPLE DEPENDENT |              | <u> </u>                          | =                   | X43              | =              |                   | OR                     | X86=    |                            |                        |
|   | FIRST PRESE                                    | NIATION OF MC   | JLIIPLE DEF  | ENDENT                            | CLAIM               |                  | +145           | =                 |                        | OR      | +290=                      |                        |
| ·   |  |   |              |                                   |                     |                  | TO<br>ADDIT. F | TAL<br>EE         |                        | OR ,    | TOTAL<br>ADDIT. FEE        |                        |
|   |  | (Column 1)  |              | (Colum                            |                     | (Column 3)       |                |                   |                        |         |                            |                        |
| 5   | `  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT                     |              | HIGHE<br>NUMB<br>PREVIO<br>PAID F | ER<br>USLY          | PRESENT<br>EXTRA | RATI           | ≣ .               | ADDI-<br>TIONAL<br>FEE | į       | RATE                       | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *   | Minus        | **                                |                     | =                | X\$ 9          | =                 |                        | OR      | X\$18=                     |                        |
|   | Independent                                    | *   | Minus        | ***                               |                     | =                | X43:           |                   |                        | OR      | X86=                       |                        |
|   | FIRST PRESE                                    | NTATION OF ML   |              | $\dashv$                          |                     |                  |                |                   |                        |         |                            |                        |
|   | Aba animita artis                              | +145  | =            |                                   | OR                  | +290=            |                |                   |                        |         |                            |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." |  |   |              |                                   |                     |                  |                | AL<br>EE          | 1                      | OR A    | TOTAL<br>DDIT. FEE         |                        |
|   |  | ber Previously Paid   |              |                                   |                     |                  | found in the   | аррі              | ropriate box           | in colu | ımn 1.                     |                        |